

PART B - FEE(S) TRANSMITTAL

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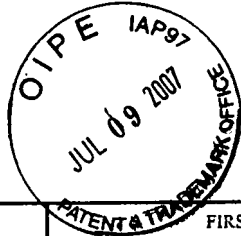
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04/10/2007

BIRCH STEWART KOLASCH & BIRCH, LLP
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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/219,121	12/23/1998	HIROSHI TANAKA	2091-0182P-S	2219

TITLE OF INVENTION: ORDER PROCESSING METHOD AND SYSTEM FOR IMAGE OUTPUT SERVICE, AND ORDER INFORMATION GENERATING APPARATUS, ORDER RECEIVING APPARATUS, AND DIGITAL CAMERA USED IN THE METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	07/10/2007
				07/10/2007 AWONDAF2 00000007 022448		09219121
EXAMINER	ART UNIT	CLASS-SUBCLASS				
HANNETT, JAMES M	2622	348-233000	01 FC:1501	1400.00 DA		
			02 FC:8001	12.00 DA		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Birch, Stewart,
 2 Kolasch & Birch, LLP
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FUJIFILM CORPORATION

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies four (4)

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Michael R. Cammarata 18912

Date July 9, 2007

Typed or printed name Michael R. Cammarata

Registration No. 39,491

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